



Docket No.: PF-0187-2 RCE

Certificate of Mailing

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on December 23, 2003.  
By: [Signature] Printed: Jeannie G. Labra

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of: Bandman et al.

Title: ANTIBODIES TO SUBUNITS OF NADH DEHYDROGENASE

Serial No.: 09/726,899

Filing Date: November 29, 2000

Examiner: Roark, J.

Group Art Unit: 1644

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Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**REQUEST FOR EXAMINER TELEPHONE INTERVIEW**

Sir:

Further to the Response to Office Action dated December 23, 2003, in the above-identified application, Applicants respectfully request a Telephone Interview with the Primary Patent Examiner and the Supervisory Patent Examiner for this application. Applicants respectfully request that no further action be taken on this application until such interview has been conducted.

Respectfully submitted,

INCYTE CORPORATION

Date: 23 December 2003

Michelle M. Stempier

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Docket No.: PF-0187-2 RCE  
Response Under 37 C.F.R. 1.116 - Expedited Procedure  
Examining Group 1644

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**TRANSMITTAL FEE SHEET**

Sir:

Transmitted herewith are the following for the above-identified application:

1. Return Receipt Postcard;
2. Amendment After Final (15 pp.);
3. Request for Examiner Telephone Interview (1 pp.); and
4. One (1) Attachment (9 pp.).

The fee has been calculated as shown below.

Claims	Claims After Amendment	Claims Previously Paid For	Present Extra	Other Than Small Entity Rate	Fee	Additional Fee(s)
Total	13	20	0	x\$18.00	\$	0
Indept.	1	3	0	x\$86.00	\$	0
First Presentation of Multiple Dependent Claims				+290.00	\$	0
Total Fee:						\$ 0

☒ No additional Fee is required.

☐ Please charge Deposit Account No. **09-0108** in the amount of : \$ \_\_\_\_\_

The Commissioner is hereby authorized to charge any additional fees required under 37 CFR 1.16 and 1.17, or credit overpayment to Deposit Account No. 09-0108. **A duplicate copy of this sheet is enclosed.**

Respectfully submitted,

INCYTE CORPORATION

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